

Instructions:

The Mayor's Summer Youth Employment Program (MSYEP) offers work experience, teaches valuable employment skills, and provides you with a summer income. MSYEP educational activities will enhance your summer experience, allowing you to develop career awareness, understanding of personal money management, and work-related social skills.

MSYEP is open to all City of Jackson residents between ages 16 through 24. Must be age 16 by March 6th.

Each applicant may submit only ONE application

All applications must have a unique Email address and Social Security Number used to identify the applicant.

To apply for MSYEP:

Visit http://www.jacksonms.gov must print, complete, and return application to the City of Jackson Department of Human and Cultural Services (Jackson Metrocenter Mall, 1000 Metrocenter Drive, Suite 101) Attn: Beverley Johnson-Durham

The **DEADLINE** for submitting your application is **Wednesday**, **March 6**, **2019 at 4:00 pm**.

Interviews will be conducted March 11-14, 2019

SUBMISSION OF AN APPLICATION DOES NOT GUARANTEE ACCEPTANCE INTO THE PROGRAM.

Selection is contingent upon available positions based on program funding.

If you are elected for MSYEP you will be notified by the MSYEP staff. Note: The Following DOCUMENTS must be turned in with application							
Proof of Residency Proof of Income (Parent/ Self) *3 recent check stubs, SSI, TANF, etc.	Social Security CardBirth Certificate/ PassportCopy of School ID, Driver's License or MS ID						
For more information of if you have questions a please contact 601.960.0335 and ask about MSYI	about completing this form or the required documents EP.						
1	o improve City services or to access additional funding. MSYEP in NOT a						

ALL ACCEPTED APPLICANTS WILL BE SUBJECT TO A BACKGROUND CHECK & DRUG TEST!!

The Mayor's Summer Youth Employment Program (MSYP) does not discriminate on the basis of age, race, creed, color, national origin, gender, sexual orientation, or disability. MSYEP will provide auxiliary aids and services, written materials in alternative formats and reasonable notifications in policies and procedures to qualified individuals with disabilities upon request.

The DEADLINE for submitting your application is Wednesday, March 6, 2019 by 4:00 pm

Return to: 1000 Metrocenter Drive Suite 101 - Attn: Beverley Johnson-Durham



Work best in a group

Department of Human & Cultural Services Family & Youth Division

Mayor's Summer Youth Employment Program (MSYEP)

Nama					
Name: Last	First		Middle		
Address:	FIISt		iviiddle		
Number and Name of Street		Apt.#		Zip Code	
Cell Phone:	Fmail Address			210 0000	
Home:	Age:	Date of Birth: /	/ Must b	ne age by March 1st	
Gender: (Male or Fer				oo ago ay maron .	
Ethnicity (circle) (optional): White, Black,	,	can. Indian, Other:			
Parent/ Guardian Full Name:			Daytime Ph	one:	
ARE YOU A U.S. CITIZEN? Yes No					
		Income			
Family Annual Income:(su					
Do you receive public assistance? Yes No Number of people in household under the age of 18 Single Parent Household? Yes No	; Type:	_(SSI, TANF, SNAP, et	c.)		
Education: Please list all schools atter					
SCHOOL NAME LOCATION				DLMA DATES ATTENDED	
	(Yes or No)	(Yes or	No)		
1					
2					
Policy prohibits employment in the same					
employed by the City of Jackson? Yes_					
Work Experience and Interests Have you participated in the City of Jackson Mayor	r Summer Youth Empl	oyment Program? Yes	s No: If	so what year(s)?	
Please describe your most Recent job if you have with the work with the work with the work of the work				When?	
Circle the THREE phrases below that best describe	e vou:				
High Energy	•	eing busy		Prefer more structure	
Creative	 Organi 	• •	,	 Prefer more structure 	
• Quiet		ew challenges		 Like being outdoors 	
 Focused 	Enjoy i	meeting new people		 Work best independently 	

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Department of Human & Cultural Services Family & Youth Division

Mayor's Summer Youth Employment Program (MSYEP)

	• •	•	-	re in this packet for m	ore info.) From the following I	ist please WRITE
•	op THREE preferences in		vided:			
	 Work with senior cit 					
•	zanaocaping, main					
•	 Work w/ children in 	•				
•	 Science Technology 		Mathematics			
•	 Arts/Theater/ Music 	:				
•	 Environmental proje 	ects				
	 Work w/ children in 	camps				
	 Media/ Web produc 	tion				
	 Office/ Library work 					
	 Community action p 					
		•				
	Outor					
1.		2.		3		
	1st Choice		2 nd Choice		3 rd Choice	
Of the ten ty	ypes of work listed above	e. I am NOT inter	rested in doing:			
•	a specific worksite reque		•			
ii you nave	a specific worksite reque	.st, list it fiere				
Tall	المامة مسمس المامة	و من ما الموسود و مورد و النازو		:4 b 4-	h waxayalah a lahi	
i eli us your	hobbies, your special sk	alls or something	you want to lear	n-it can neip us matc	n you with a job!	
What I	hours can you work?	Only AM	Only PM	Fither		
***************************************			0, 1	Little!		
			1			
	nrolled in summer school?			Are you able to work	for the entire eight weeks?	
Yes	_No (Notifying us early will	help MSYEP		(June-July) Ye	s No	
find appropria	ate iobs)			If no, what dates will	you be absent?	
ALL ACCEP	TED APPLICANTS W	VIII RE SUR I	FCT TO A RAI	CKGROUND CHEC	CK & DRUG TESTU	
ALL AUGLI	TED ALL EIGANTO	HEE BE GODS	LOT TO A DA	SKOKOOND ONE	OK & DROG TEOTH	
	er					
i nereby cert	tify that the information	on this applica	ation is correct	to the best of my Kr	nowledge.	
X						
Applicant Signat	ture				Date	
I hereby certify t	that the applicant listed abov	e is a resident of J	ackson, MS and ha	s my permission to parti	cipate in all activities associated v	vith the Mayor's Summer
Youth Employm	ent Program. I also give per	mission for images	s/ recordings of my	child to appear in city pu	blication and websites or program	related media accounts
including print, v	video and internet publicatio	ns.				
X						
Parent/ Guardia	•				Date	
Any falsication of	of information will result in di	smissal from the M	layor's Summer Yo	outh Employment Progra	ım, as well as exclusion from futu	re program participation
- O#:	•					
For Office Use (•			0 - 1 - 1 - 0	مثان ٥٠٠٠	
Proof of Re	esiaency			Social Secui	-	
Proof of Inc	come (Parent/ Self)				ate/ Passport	
*3 recent check stubs. SSI. TANF. etc.			I-9 Form	ool ID Driver's License or MS ID		